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S.D. SEC. OF STATE

STATE OF SOUTH DAKOTA
Statement of Legal Newspaper Ownership and Circulation

1. TITLE OF NEWSPAPER: LaKota Times		2. DATE: 9-30-21
3. FREQUENCY OF ISSUE: Weekly	3A. NO. OF ISSUES PUBLISHED ANNUALLY: 52	3B. ANNUAL SUBSCRIPTION PRICE $: 65
4. COMPLETE MAILING ADDRESS OF KNOWN OFFICE OF PUBLICATION (Street, City, County, State and ZIP+4 Code) (Not printers): 29263 SD Highway 73 BOX 386 Martin, SD 57551 Bennett		
5. COMPLETE MAILING ADDRESS OF THE HEADQUARTERS OR GENERAL BUSINESS OFFICES OF THE PUBLISHER (Not printers): 29263 SD Highway 73 BOX 386 Martin S.D. 57551		
6. FULL NAME OF PUBLISHER: Connie Louise Smith		
7. OWNER (If owned by a corporation, its name and address must be stated and list on the back of this form the names and addresses of stockholders owning or holding 1 percent or more of total amount of stock. If not owned by a corporation, the names and addresses of the individual owners must be given. If owned by a partnership or other unincorporated firm, its name and address, as well as that of each individual must be given.		
FULL NAME: Thunderbird Media INC.	COMPLETE MAILING ADDRESS: 29263 SD Highway 73 Martin SD 57551	
8. KNOWN BONDHOLDERS, MORTGAGES, AND OTHER SECURITY HOLDERS OWNING OR HOLDING 1 PERCENT OR MORE OF TOTAL AMOUNT OF BONDS, MORTGAGES OR OTHER SECURITIES (If there are none, so state. If more space is needed, list on back of this form.: None		

9. EXTENT AND NATURE OF CIRCULATION	AVERAGE NO. COPIES EACH ISSUED PRECEDING 12 MONTHS	ACTUAL NO. COPIES ISSUED NEAREST TO FILING DATE
A. TOTAL NO. COPIES (Net Press Run Plus Paid Electronic Copies)	4002	4002
B. PAID AND/OR REQUESTED CIRCULATION		
1. Sales through dealers and carriers, street vendors, and counter sales.	2220	2220
2. Mail Subscription (Paid and or requested)	1062	1062
3. Paid Electronic Copies	202	202
C. TOTAL PAID AND/OR REQUESTED CIRCULATION (Sum of 9B1, 9B2 and 9B3.)	3484	3484
D. FREE DISTRIBUTION		
1. BY MAIL, CARRIER OR OTHER MEANS	250	250
2. SAMPLES, COMPLIMENTARY AND OTHER FREE COPIES	100	100
E. TOTAL DISTRIBUTION (Sum of C, D1 and D2)	3834	3834
F. COPIES NOT DISTRIBUTED		
1. Office use, left over, unaccounted, spoiled after printing	48	48
2. Return from News Agents	120	120
G. TOTAL (Sum of E, F1 and F2 – Should equal total shown in A.)	4002	4002

Statement must be signed by Publisher, Business Manager, or Owner in the presence of a Notary Public
I swear that the statements made by me are true, correct, and complete:

Connie Smith
(Signature)

owner/publisher
(Title)

State of South Dakota)
§
County of Bennett)

Sworn to before me this 29 day of Sept., 2021

Connie Smith
Notary Public

My commission expires: 12-13-25

(Seal)

CONNIE L. SMITH
NOTARY PUBLIC
SOUTH DAKOTA

Form: SOS REC 051 9/2016